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## FACSIMILE TRANSMITTAL

**TO:** Examiner Stephen E. Jones  
**COMPANY:** U.S. Patent and Trademark Office  
**FAX NO.:** 571-273-8300

**FROM:** Jerri Pearson  
**COMPANY:** Alcatel USA  
 Intellectual Property Department

**FAX NO.:** 972-477-9328  
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**DATE:** September 8, 2005  
**TOTAL PAGES (incl. cover)** 11

Serial No: 09/987,376  
 Attorney Docket No.: 132706

I hereby certify that the following documents are being transmitted via facsimile to the U.S. Patent and Trademark Office on September 8, 2005. Each document is comprised of 1 page unless otherwise specified.

1. Facsimile Transmittal
2. Fee Transmittal for FY 2005
3. Terminal Disclaimer
4. Amendment ( 6 pgs)
5. Change of Correspondence Address – Application
6. Statement under 37 CFR 3.73(b)

  
 Jerri Pearson

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SEP 08 2005

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).  
**FEE TRANSMITTAL**  
For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 130.00)

## Complete if Known

Application Number	09/987,376
Filing Date	November 14, 2001
First Named Inventor	Wilber, et al
Examiner Name	Stephen E. Jones
Art Unit	2817
Attorney Docket No.	132706

## METHOD OF PAYMENT (check all that apply)

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$)

Fee (\$)

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200

100

Multiple dependent claims

360

180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
	- 20 or HP =	x 50.00	= 0.00			
	HP = highest number of total claims paid for, if greater than 20				360.00	0.00

Indep. Claims

Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = 200.00 = 0.00

HP = highest number of independent claims paid for, if greater than 3

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50 = 0 (round up to a whole number) x 250.00 = 0.00		

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

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Fee Paid (\$)

0.00

130.00

Non-English Specification, \$130 fee (no small entity discount)

Other: Terminal Disclaimer (Fee code=1814)

Fee Paid (\$)

0.00

130.00

Signature \_\_\_\_\_

Registration No. 22,753

Telephone (972) 519-3735

Name (Print/Type) **V. Lawrence Sewell**

Date 9/8/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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